

Eatonville School District Harassment, Intimidation or Bullying (HIB) Incident(s) Reporting Form

****Status of Report:** Anonymous Confidential Non-Confidential
(See Explanation on Back of Form)

Reporting person (optional): _____

Targeted student: _____

Your email address (optional): _____

Your phone number (optional): _____ Today's date: _____

Name of school adult you've already contacted (if any): _____

Name(s) of bullies (if known):

On what dates did the incident(s) happen (if known):

Where did the incident happen? Circle all that apply.

Classroom	Hallway	Restroom	Playground	Locker room	Lunchroom	Sport field
Parking lot property	School bus On the way to/from school	Internet	Cell phone	During a school activity		Off school

Other (Please describe.) _____

IF the incident(s) happened outside of school, what effects if any did it have in school? (Can use back of form)

Please check the box that best describes what the bully did. Please choose all that apply.

- Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student
- Getting another person to hit or harm the student
- Teasing, name calling, making critical remarks or threatening in person, by phone, by e-mail, etc.
- Putting the student down and making the student a target of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Making the student fearful, demanding money or exploiting
- Spreading harmful rumors or gossip
- Cyber bullying (bullying by calling, texting, emailing, web posting, etc.)
- Other

If you select other, please describe: _____
(If you need more space please use back of page)

Why do you think the harassment, intimidation or bullying occurred?

Were there any witnesses? Yes No If yes, please provide their names:

Did a physical injury result from this incident? If yes, please describe.

Was the target absent from school as a result of the incident? Yes No Not Sure If yes, please describe

Is there any additional information that the school should know?

Thank you for reporting!

-----For Office Use-----

Received by: _____

Date received: _____

Action taken: _____

Parent/guardian contacted: _____

Circle one: Resolved Unresolved

Referred to: _____